



United States Environmental Protection Agency
Washington, DC 20460

Certification with Respect to Citation of Data

Form Approved
OMB No. 2070-0060
Approval Expires 11-30-93

Applicants Name and Address

Applied Biochemists, Inc.
6120 West Douglas Ave.
Milwaukee, WI 53218

EPA File Symbol/Registration Number

Product Name

33068-E AQUASHADE OA

Date of Application

9/9/92

NOTE: If your product is a 100% repackaging of another EPA-registered product that you purchase, and is labeled for the same uses, you do not need to submit this form. You must submit the Formulator's Exemption Statement (EPA Form 8570-27).

1. This application is supported by all data submitted or cited in the application. In addition, if cite-all options are indicated, this application is supported by all data in the Agency's files that concern the properties or effects of this product that is identical or substantially similar, and that is one of the types of data that would be required to be submitted if this application sought the initial registration of a product of identical or similar composition and intended uses under the data requirements in effect on the date of approval of this application. (Check the appropriate boxes, in items 2 and 3 below, that pertain to your application.)
2. I certify that, for each study cited in support of this application for registration that is an exclusive use study,
☒ I am the original submitter*; or
☐ I have obtained the written permission of the original data submitter to cite that study*
3. I certify that, for each study cited in support of this application for registration that is not an exclusive use study:
 - a. ☒ I am the original data submitter*; or
☐ I have obtained the written permission of the original data submitter to cite that study*; or
 - b. ☐ I have notified in writing the companies that have submitted data I have cited to support this application and have offered to: (a) Pay compensation for those data in accordance with section 3(c)(1)(D) and 3(c)(2)(D) of the Federal Insecticide, Fungicide and Rodenticide Act (FIFRA); and (b) Commence negotiations to determine which data are subject to the compensation requirement of FIFRA and the amount and terms of compensation due, if any. The companies I have notified are: (Check one)
☐ All companies listed on the Pesticide Data Submitters List for all active ingredients contained in my product (cite-all method or cite-all option under Selective Method*). (Also, sign the General Offer Statement below.)
☐ Those companies that have submitted the studies which I have cited (Selective method*).

* A Data Matrix identifying these studies is attached. (Note: a Data Matrix is not required under the cite-all method.)

Signature

Name and Title

John D. Puetz

V.P. Research & Development

Date

9/30/92

General Offer to Pay: I hereby offer and agree to pay compensation to other persons, with regard to the approval of this application, to the extent required.

Signature

Name and Title

Date